\* **NOTE:** Fee schedules are subject to review and amendment under the provisions of § 67:16:01:28.

## COVERED INDEPENDENT MENTAL HEALTH PRACTITIONERS

As per § 67:16:41:09, payment for covered mental health services is limited to the lesser of the provider's usual and customary charge or the fee listed below. If no fee is listed, payment is 40% of the provider's usual and customary charge.

## Last Updated May 12, 2008

| CODE  | PROCEDURE  | FEE      |
|-------|--|----------|
| 90801 | Psychiatric Diagnostic Interview Examination   | \$ 85.65 |
| 90885 | Interactive Individual Medical Psychotherapy   | \$ 76.22 |
| 90899 | Diagnostic assessment, therapeutic contacts with the recipient, family, and significant others to the extent necessary to complete an accurate psychological evaluation and diagnosis                            | \$ 25.00 |
| 96101 | Psychological testing, with interpretation and report, per hour, limited to a licensed psychologist  | \$ 53.03 |
| 96118 | Neuropsychological testing, with interpretation and report, per hour, limited to a licensed psychologist   | \$ 53.03 |
| 90804 | Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient                              | \$ 31.16 |
| 90806 | Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 45 to 50 minutes face-to-face with the patient                              | \$ 56.65 |
| 90816 | Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting; unit is 20 to 30 minutes face-to-face with the patient | \$ 31.16 |
| 90818 | Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting; unit is 45 to 50 minutes face-to-face with the patient | \$56.65  |
| 90847 | Family psychotherapy, (conjoint psychotherapy) (with patient present)  | \$ 11.33 |
| 90849 | Multiple-family group psychotherapy  | \$ 11.33 |
| 90853 | Group medical psychotherapy, (other than a multiple-family group)  | \$ 11.33 |